

ISSUE SLIP STAPLE AREA (for additional cross references)

SITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER		20	9/17
FORMALITY REVIEW	R	90	05/12/0
RESPONSE FORMALITY REVIEW	STB	(16)	9-12-01

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 ÷ ..... Restricted      O ..... Objected

Claim	Date
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Best Available Copy

If more than 150 claims or 10 actions  
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